

COOK COUNTY
HEALTH

Social Determinants of Health

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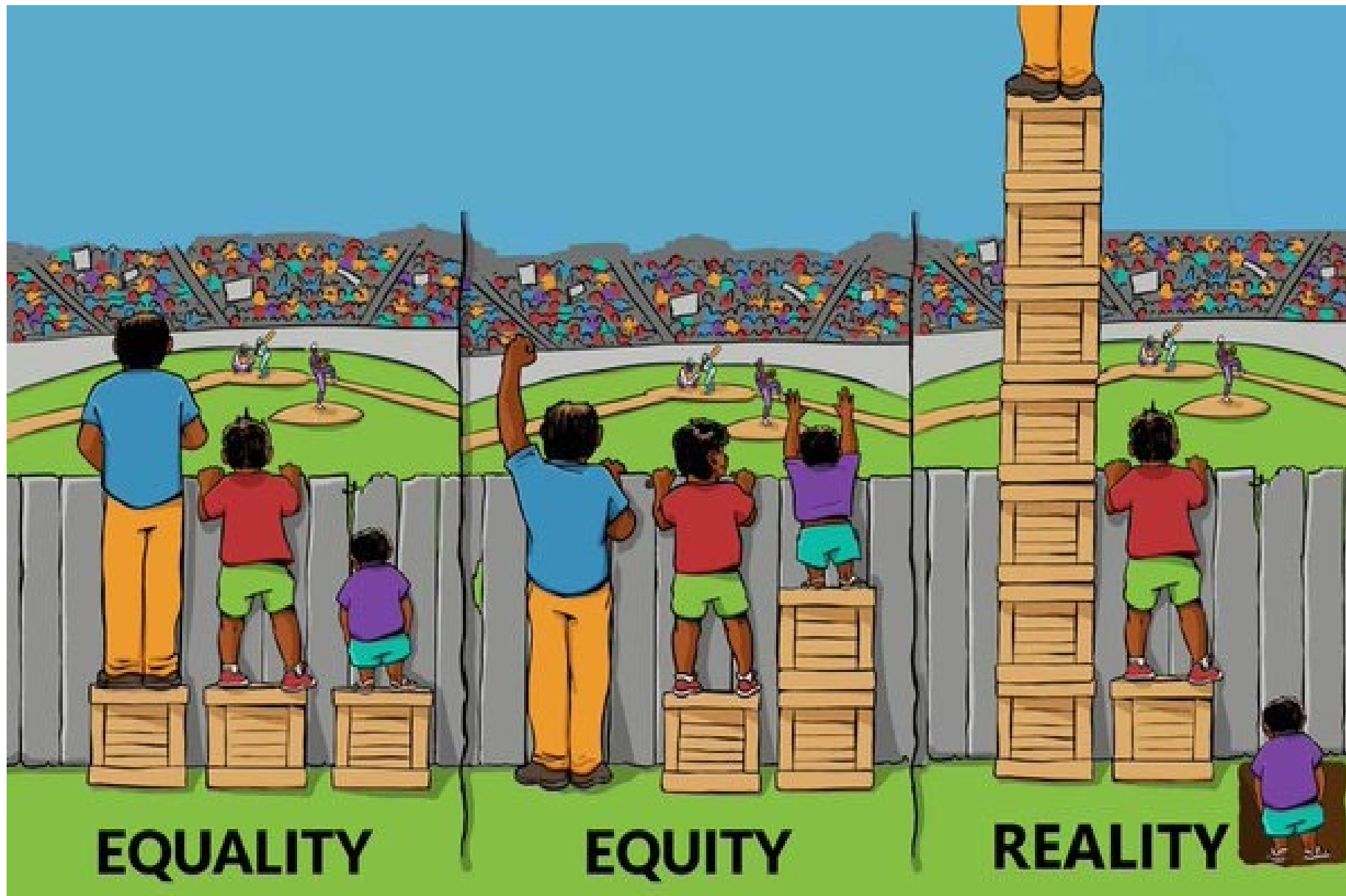
Chief Operating Officer

Cook County Department of Public Health

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Social Determinants of Health

- The social determinants of health are the conditions in which people are born, grow, live, work and age.
 - Health care
 - Affordable housing
 - Healthy food
 - Safe, walkable neighborhoods
 - Healthy work environments
 - Living wage
- Social determinants of health are shaped by the distribution of money, power, and resources throughout local communities, nations, and the world.

Commission on Social Determinants of Health (CSDH), Closing the gap in a generation: health equity through action on the social determinants of health. Final report of the Commission on Social Determinants of Health. 2008, World Health Organization: Geneva.



Health Equity

“Health equity is the assurance of the conditions for optimal health for all people.”

Achieving health equity requires valuing all individuals and populations equally, recognizing and rectifying historical injustices, and providing resources according to need.”

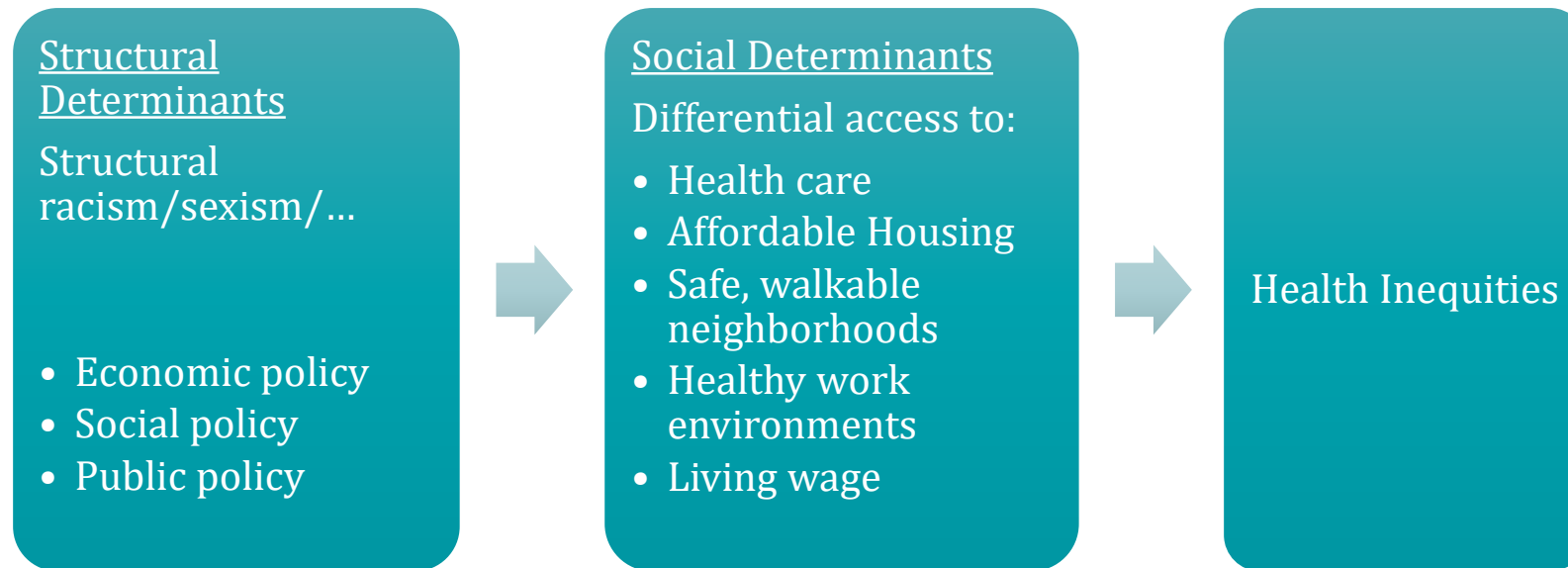


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How Do Health Inequities Arise?



Modified from Solar, O., & Irwin, A. (2007). A conceptual framework for action on the social determinants of health.



Structural Racism

A fundamental cause of health inequity, associated with imbalances in political power throughout society... Structural racism perpetuates residential segregation, concentrated poverty, disinvestment in neighborhoods, and targeting neighborhoods for toxic waste— all issues related to serious health outcomes. (NACCHO 2016)

National Association of County and City Health Officials (NACCHO). (2016). *Health Inequity: A Charge for Public Health*. Retrieved from <https://nnphi.org/wp-content/uploads/2016/09/na16-whitepaper-final-print.pdf>

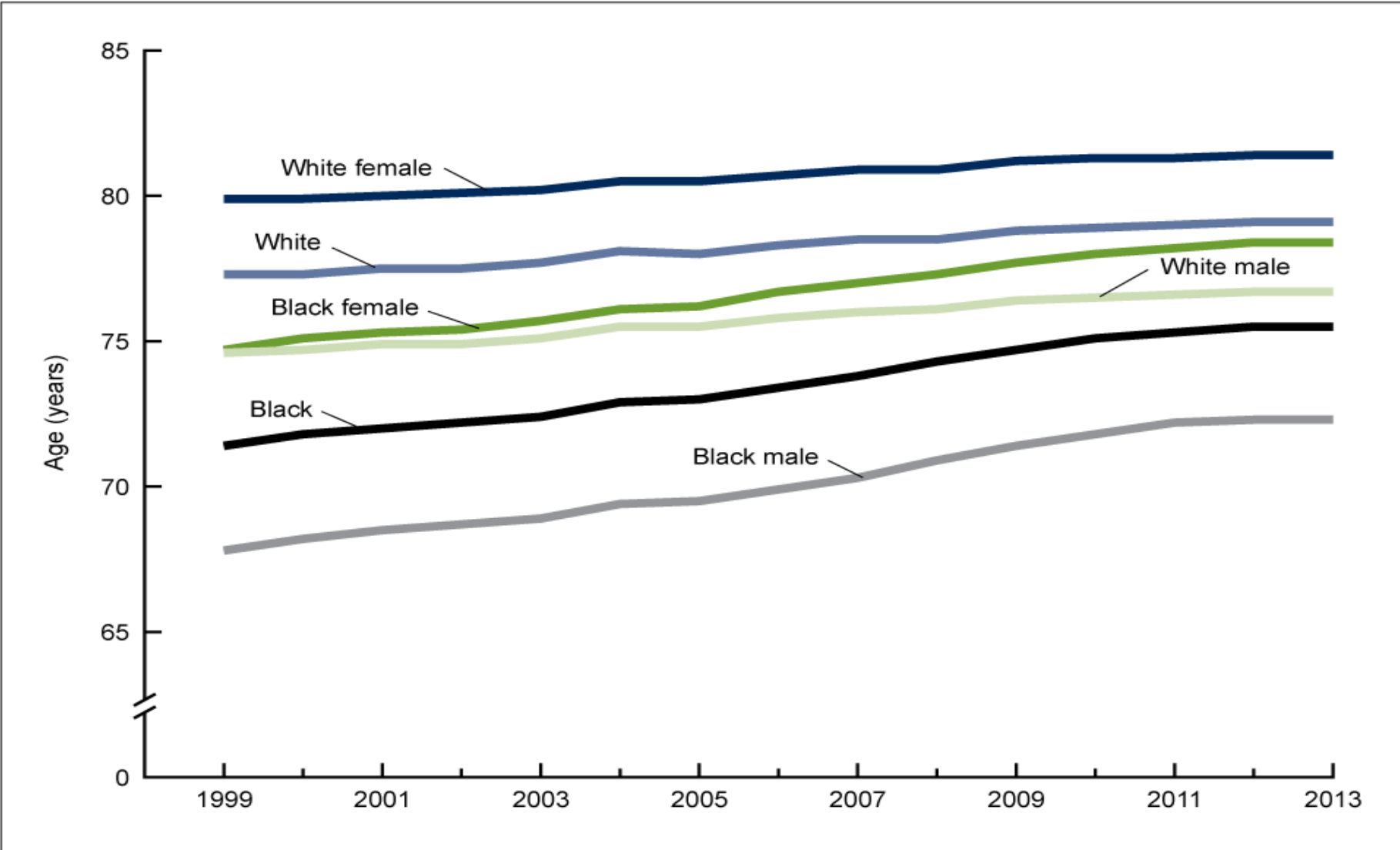


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Figure 1. Life expectancy, by race and sex: United States, 1999–2013



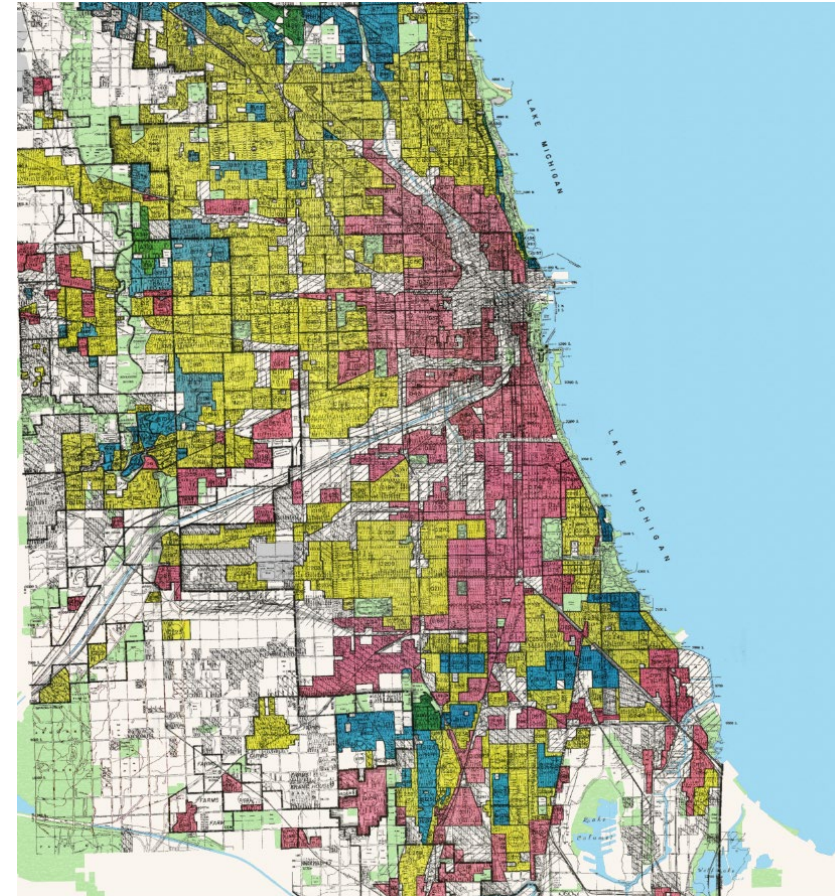
1934–1968: FHA Mortgage Insurance Requirements Utilize Redlining:

“The FHA also explicitly practiced a policy of “redlining” when determining which neighborhoods to approve mortgages in.

“... color-coded maps indicating the level of security for real estate investments... appraisers divided neighborhoods by categories including occupation, income and ethnicity of inhabitants:

C (yellow) were neighborhoods that were “definitely declining.” Generally sparsely populated fringe areas that were typically bordering on all black neighborhoods.

D (red) (hence the term “red-lining”) were areas in which “things taking place in 3 (“C”) had already happened.” Black and low income neighborhoods were considered to be the worst for lending”.

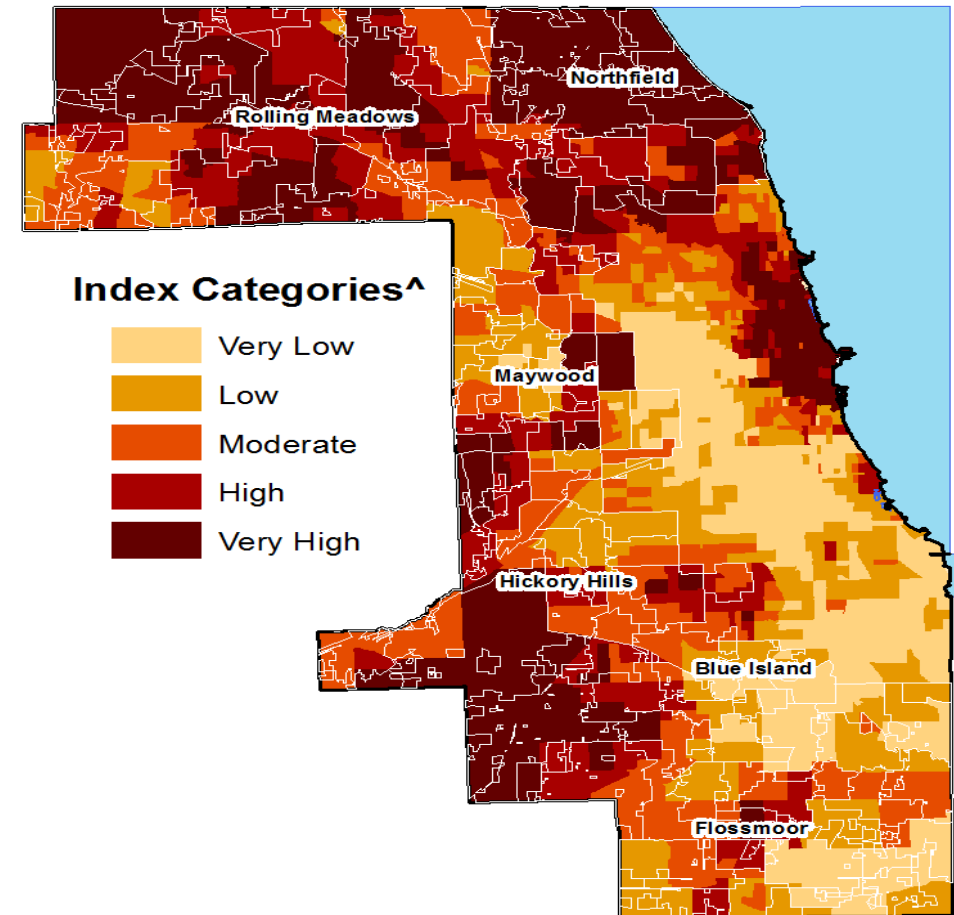


1934: Federal Housing Administration Created. (n.d.). Retrieved February 22, 2018, from <http://www.bostonfairhousing.org/timeline/1934-FHA.html>



Racial/Ethnic Inequities in Neighborhood Opportunities

Childhood Opportunity Index by Census Tract
Cook County-IL (Metro Area)*, 2007-2013**



Race/Ethnicity of Child by Neighborhood Opportunity Level

COI Level	NH Asian	NH Black	NH White	Hispanic
Very Low	2%	51%	2%	31%
Low	10%	29%	10%	35%
Moderate	25%	11%	21%	20%
High	30%	5%	26%	8%
Very High	32%	4%	41%	5%

^ Each Census Tract is shaded according to its Opportunity Index category representing childhood opportunity levels ranging from "very low" to "very high" relative to the other tracts in the Chicago-Joliet-Naperville, IL-IN-WI Metro Area.



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Infant Housing and Food Insecurity



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All new APORS families visited 10/2017 – 07/2018

- Address change (past 12 mo.) or temporary housing
- Food pantry referral

Adverse Pregnancy Outcomes Reporting System (APORS)

Eligibility

- Cook County resident
- No income eligibility
- Birth defect/congenital anomaly

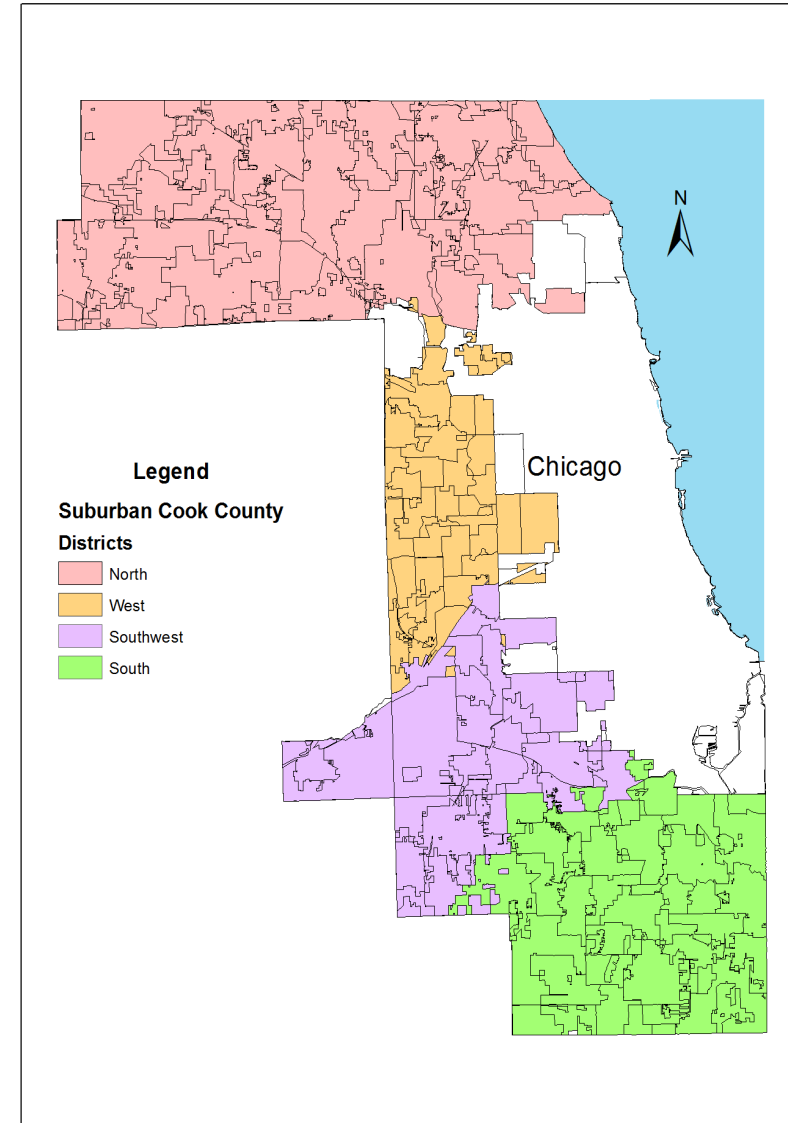
APORS Criteria:

- Born at less than 31 weeks gestational age
- Infant was part of a triplet, or higher birth
- Positive drug toxicity diagnosis, signs/symptoms, or mother admits to drug use during pregnancy
- Diagnosed with a congenital anomaly; a serious birth defect

Food / Housing Insecurity Among APORS Families

SCC District

	<u>North</u>	<u>West</u>	<u>Southwest</u>	<u>South</u>
APORS Families	182	150	151	114
Address Change or temporary housing	9	7	16	13
Food Pantry Referral	9	18	6	21



How Can We Advance Health Equity?

Some successful approaches



Strengthening health equity... means **going beyond the contemporary concentration on the immediate causes of disease.**

WHO Commission on Social Determinants of Health. (2007). Achieving health equity: from root causes to fair outcomes: Commission on Social Determinants of Health, Interim statement.



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Mobilize Data to Advance Health Equity



- Surveillance of health equity policies across 140+ school districts in SCC
- Explore potential analysis of suburban school discipline reports for racial and other inequities



Active Transportation



- Summit was selected as the recipient for the CBS EcoMedia project
- Funding from CBS will support construction of a sidewalk, adjacent to a middle school
- Construction to take place in 2019



Worker Health



- Participated in UIC SPH Healthy Work Collaborative
- Strengthened relationships with two worker advocacy orgs
- Coordinating efforts around County's Min Wage and Earned Sick Leave Ordinances
- Glenview opted-in to both ordinances, impacting 5,725 workers (Jan 2019)



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Good Food Purchasing Program



- Cook County resolution adopted in May 2018
- Established CCDPH as convening agency for Task Force
- Baseline assessment expected to be initiated in 2019



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Lead Poisoning Prevention



- Participating in pilot program exploring automatic eligibility for Early Intervention
- 57 units remediated in 2018
- Provided comments to influence rules for Lead Poisoning Prevention Act



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Sexually Transmitted Infections

If you've been diagnosed with an STD, you may be able to get treatment for your partner, too.



If you've been diagnosed with chlamydia or gonorrhea, the first step is to **get treatment**.

But did you know that you may be able to get treatment for your partner, too?

Talk to your doctor. They may be able to give you medicine or a prescription for your partner — even without seeing them. This is called **expedited partner therapy (EPT)** or patient-delivered partner therapy (PDPT), and it's available in most states.

With EPT:

PRESCRIPTION

- ☒ Your partner can get treated quickly — without having to go to the doctor first
- ☒ You'll be protected from your partner passing the infection back to you
- ☒ Neither of you will pass the infection on in the future



Why does my partner need treatment?

Without treatment, your partner could pass the STD back to you. Keep in mind that many people with chlamydia and gonorrhea have no signs or symptoms, so your partner may have the STD and not know it. Left untreated, chlamydia and gonorrhea can cause serious health problems.

If you've been diagnosed with chlamydia or gonorrhea, **talk to your doctor** to find out if EPT is an option for you and your partner.

To learn more about how you can prevent STDs, visit cdc.gov/std/prevention.



Centers for Disease Control and Prevention
National Center for HIV/AIDS,
Viral Hepatitis, STD, and
TB Prevention

- Sharing data
- Educating the public and providers
- Encouraging more screening for STDs
 - Especially chlamydia and gonorrhea
 - Especially in those 18-24 years of age
- Urging providers to learn about and use Expedited Partner Therapy
- Making sure cases receive treatment after being diagnosed with STIs
- Emphasizing prevention
 - Condom availability throughout CCH
 - Correct and consistent condom use



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In Summary

Long history of discrimination and racist practices affecting residents of the near west and southern parts of Cook County

The evidence is clear that racism is deeply entrenched and continues to affect the opportunities available to people of color

This has resulted in areas of concentrated poverty and low opportunity

As a result, populations residing in those areas suffer from disproportionately poor health outcomes

Must improve health equity and correct Social Determinants of Health



Thank You



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